

PTO/SB/21 (08-00)

	Application Number	09/851,433		
TRANSMITTAL	Filing Date	May 9, 2001		
FORM	First Named Inventor	Jun KOYAMA et al.		
1 011111	Group Art Unit	2677		
(to be used for all correspondence after initial filing)	Examiner Name	V. Kovalick		

(to be used for all correspondence after initial filing)		Examiner Name	V. Kovalick			
Total Number of Pages in This Submission		Attorney Docket Number	0756-2307			
ENCLOSURES (check all that apply)						
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declaration(s Extension of Time Reques Express Abandonment Re Information Disclosure Sta Certified Copy of Priority Document(s) Response to Missing Parts Incomplete Application Response to Missing F under 37 CFR 1.52 or	(for ar Drawi) Decla Attorn Licens Petitic Provis quest Termi Require CD, N Remarks	ration and Power of ey sing-related Papers on on to Convert to a sional Application or of Attorney, Revocation ge of Correspondence ss nal Disclaimer est for Refund lumber of CD(s) The Commissioner is here	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosures 1. RCE 2. 3. 4. 5. 6.			
	SIGNATURE OF APP	PLICANT, ATTORNEY, OR A	GENT			
Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165					
Signature	5.					
Date	1-10-06					
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Signature	ad 1 m	Atanna	Date /-/0-06			

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FEE	TRANSMITTAL
1	FOR FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision. ☐ Applicant Claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Signature

(\$) 1240.00

	Complete if Known						
Application Number	09/851,433	•					
Filing Date	May 9, 2001						
First Named Inventor	Jun KOYAMA et al.						
Examiner Name	V. Kovalick						
Group Art Unit	2673						
Attorney Docket No.	0756-2307						

Telephone

1-10-06

Date

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	METHOD OF PAYM	IENT	FEE CALCULATION (continued)							
1. The Commissioner is hereby authorized to charge indicated		3. ADDITIONAL FEES								
fees and credit any overpayments to:		1	Large Small							
.			Fee	Entit Fee	ty Fee	Entity Fee	y			
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Name	Law Office									
:			1812	2,520	1812	2,520	For filing a request	for ex parte reexan	nination	
Charge	Any Additional Fee Required		1804		1804		Requesting publicat			
	7 CFR 1.16 and 1.17 and		1805	1,840*	1805		Requesting publication of SIR after Examiner action			
credit o	verpayments			,		-				
☐ Applica	nt claims small entity status.		1251	120	2251	60	Extension for reply	within first month		
	CFR 1.27		1252	450	2252	225	Extension for reply	within second mor	ıth	\$450
•	ent Enclosed:		1253	1020	2253	510	Extension for reply	within third month	1	
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		Order	4							
	FEE CALCULATI	ON	1255	2,160	2255		Extension for reply	within fifth month		-
1. BASIC FIL	ING FEE		1401	500	2401		Notice of Appeal			
Large Entity	Small Entity	• .•	1402	500	2402	250	Filing a brief in sup	port of an appeal		
Fee Fee Code (\$)	Fee Fee Fee Descr Code (\$)	ription Fee Paid	1403	1000	2403	500	Request for oral hea	aring		
	2001 150 Utility fili		1451	1,510	1451	1,510	Petition to institute	a public use procee	eding	
	•		1452	500	2452	250-	Petition to revive -	unavoidable		
1111 500			1453	1,500	2453	750	Petition to revive -	unintentional		
1311 200 2311 275 Examination fee		1501	1,400	2501	700	Utility issue fee (or	reissue)			
Over 100 Sheets/250 for each additional 50		1502	800	2502			,			
		1503	1100	2503		Plant issue fee				
[1462	400	1462		Petitions, Group I				
	SUBTOTAL (1)	(\$)	1463	200	1463	200	Petition, Group II			
			1464	130	1464	130	Petitions, Group III	22 CD 1 17(a)		
2. EXTRA CI	AIM FEES		1807	50	1807		Processing fee under Submission of Infor		Cemt	
	Extra Claims	Fee from Fee Paid	1806	180	1806	180	Submission of Info	rmation Disclosure	Sunt	
Total Claims	-20** = X		8021	40	8021	40	Recording each pat		property (times	
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Independent Claims	-3** = X	\$200 = [1809	790	2809	393	Filing a submission § 1.129(a))	i aiter imai rejectio	II (37 CFR	
Multiple Depende	ent	=	1810	790	2810	395	For each additional	invention to be ex-	amined (37 CFR	
Large Entity	Small Entity		1801	790	2801	395	§ 1.29(b)) Request for Continu	ued Examination (F	RCE)	\$790
Fee Fee	Fee Fee Fee Desci	iption					•			
Code	(\$) Code (\$)		1802	900	1802	900	Request for expedit application	ted examination of	a design	
1202 50	2202 25 Claims in	excess of 20	Other	fee (spe	ecify)_					
1201 200	2201 100 Independe	ent claims in excess of 3								
1203 360	2203 180 Multiple d	lependent claim, if not paid	* Red	luced by	Basic F	iling Fe	ee Paid	SUBTOTAL (3)	(\$) 1240.00	
1204 200	2204 100 ** Reissu	e independent claims over	1	,		-		,		
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1205 50 2205 25 ** Reissue claims in excess of 20 and			I	hereby ce	rtify that	t this correspondence is	TE OF MAILING being deposited with t	the United States Postal	Service with	
over original patent			ent postag	ge as first	class ma	ail in an envelope addres	ssed to Commissioner	for Patents, P.O. Box I	450, Alexandria,	
SUBTOTAL (2) (\$)			VA 22	2313-1450	, on <i>[</i>	(" udile	1 Stamp	e~	
**or number previously paid, if greater; For Reissues, see above										
SUBMITTED	BY							Complete (if ap		
Name (Duint/T	Fric I Roh	inson	Regi	istration	No.	38	,285	Telephone	(571) 434-678	9

(Attorney/Agent)